



PTO/SB/17 (6/99)

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
for FY 2003**

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$) 1,110.00**Complete if Known**

Application Number	09/692,255
Filing Date	October 19, 2000
First Named Inventor	Stephen E. Savas
Examiner Name	Alexander Markoff
Group/Art Unit	1746
Attorney Docket Number	14912-777

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit
Account
Number

23-2415 (Docket No. 14912-777)

Deposit
Account
Name

Wilson Sonsini Goodrich & Rosati

- ☒
- Charge Any Additional Fee Required
-
- Under 37 CFR §§ 1.16 and 1.17

- 2.
- ☐
- Payment Enclosed:**

☐ Check ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	750	201	375	Utility filing fee	
106	330	206	165	Design filing fee	
107	520	207	260	Plant filing fee	
108	750	208	375	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$)**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims <input type="text"/> -20** = <input type="text"/> x <input type="text"/> = <input type="text"/>			
Independent Claims <input type="text"/> -3** = <input type="text"/> x <input type="text"/> = <input type="text"/>			
Multiple Dependent <input type="text"/> = <input type="text"/>			

**or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	410	216	205	Extension for reply within second month	
117	930	217	465	Extension for reply within third month	330.00
118	1,450	218	725	Extension for reply within fourth month	996.25
128	1,970	228	985	Extension for reply within fifth month	23415
119	320	219	160	Notice of Appeal	10000104
120	320	220	160	Filing a brief in support of an appeal	934.00 DA
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	180.00
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)					
Other fee (specify)					
55/110 Terminal Disclaimer					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) 1,110.00**SUBMITTED BY**

Name (Print/Type)	George A. Willman	Registration No. (Attorney/Agent)	41,378	Telephone	650-493-9300
Signature		Date	September 30, 2003	Customer No.	021971

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22213-1450

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PTO/SB/21 (6-99)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/692,255	
	Filing Date	October 19, 2000	
	First Named Inventor	Stephen E. Savas	
	Group/Art Unit	1746	
	Examiner Name	Alexander Markoff	
Total Number of Pages in This Submission	74	Attorney Docket Number	14912.777

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">5 cited references.</div>
<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	George A. Willman, Reg. No. 41,378, WILSON SONSINI GOODRICH & ROSATI		
Signature			
Date	September 30, 2003	Customer Number:	021971

CERTIFICATE OF EXPRESS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated below and addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 9/30/2003.			
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Typed or printed name	Donna L. Hengst		
Signature		Date	September 30, 2003

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